No. W 13203	Due no later than October 31, 2008	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address - Correct in this box, if applicable	PAMELA JOHNSON
		6890 FAIRVIEW AVE
450 NORTH FOURTH STREET PO BOX 83720	HAIR ATELIER, L.L.C. 4766 JAGUAR AVE	BOISE, ID 83704
BOISE, ID 83720-0080	BOISE, ID 83713	
		3. New Registered Agent Signature
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Limited Liability Compan	ies: Enter Names and Addresses of Managers.	
Office held Name	Street or P.O. Address City	State Zip
Manager Pame	Street or P.O. Address City Column US90 Janview B	015e del 83704
	े अस्ति होते. स्ट्रीटिंग के क्षेत्र के क्षेत् स	ूबद स्मातक्षण राज्याच्या स्थापना । इ.स. १ १ १ १ १ १ १
5. Organized Under the Laws of: IDAHO W 13203	Signature Cun ly Ob	Way Date 8 26-08
W 13203	Name Printed Tomela Johns	on Title Manager

ومصابعة فعلمان المتحج فللمصار المتعجج الكرابيجين الكائلة كالرائح الإسارات الربايات الرازات المترازي الركاري وال